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Sib Data Sheet

CONFIRMATION NO. 4012

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|--|--|---|------------------------|---------------------------------------|
| SERIAL NUMBER 10/036,565 | FILING DATE 12/31/2001 RULE | CLASS 710 | GROUP ART UNIT 2181 | ATTORNEY DOCKET NO. 47545/DMC/V165 |
| APPLICANTS Norm Hendrickson, Colorado Springs, CO; Andrew Schmitt, Salem, NH; Timothy Coe, Oxnard, CA; | | | | |
| ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/259,968 12/30/2000 AND CLAIMS BENEFIT OF 60/260,079 01/04/2001 AND CLAIMS BENEFIT OF 60/260,628 01/08/2001 AND CLAIMS BENEFIT OF 60/261,868 01/10/2001 AND CLAIMS BENEFIT OF 60/272,635 02/28/2001 AND CLAIMS BENEFIT OF 60/273,763 03/05/2001 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/05/2002 | | | | |
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____ | STATE OR COUNTRY CO | SHEETS DRAWING 33 | TOTAL CLAIMS 61 |
| ADDRESS 23363 | | | | |
| TITLE Data de-skew method and system | | | | |
| FILING FEE RECEIVED 2364 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |